

## ***Index of Claims***



**Application No.**

10/721,390

Examiner

Joseph Moy

**Applicant(s)**

SCHWARZ, STEFAN H.

## **Art Unit**

3727

|   |                 |
|---|-----------------|
| ✓ | <b>Rejected</b> |
| = | <b>Allowed</b>  |

|   |  |
|---|--|
| — | <b>(Through numeral)<br/>Cancelled</b> |
| ÷ | <b>Restricted</b>                      |

|   |                     |
|---|---------------------|
| N | <b>Non-Elected</b>  |
| I | <b>Interference</b> |

|   |                 |
|---|-----------------|
| A | <b>Appeal</b>   |
| O | <b>Objected</b> |

| Final | Original | Claim | Date |
|-------|----------|-------|------|
|       |          | 4     |      |
|       |          | 4     |      |
|       |          | 04    |      |
| 1     | 1        | =     |      |
| ✓     | 2        | =     |      |
|       | 3        |       |      |
|       | 4        |       |      |
|       | 5        |       |      |
|       | 6        |       |      |
|       | 7        |       |      |
|       | 8        |       |      |
|       | 9        |       |      |
|       | 10       |       |      |
|       | 11       |       |      |
|       | 12       |       |      |
|       | 13       |       |      |
|       | 14       |       |      |
|       | 15       |       |      |
|       | 16       |       |      |
|       | 17       |       |      |
|       | 18       |       |      |
|       | 19       |       |      |
|       | 20       |       |      |
|       | 21       |       |      |
|       | 22       |       |      |
|       | 23       |       |      |
|       | 24       |       |      |
|       | 25       |       |      |
|       | 26       |       |      |
|       | 27       |       |      |
|       | 28       |       |      |
|       | 29       |       |      |
|       | 30       |       |      |
|       | 31       |       |      |
|       | 32       |       |      |
|       | 33       |       |      |
|       | 34       |       |      |
|       | 35       |       |      |
|       | 36       |       |      |
|       | 37       |       |      |
|       | 38       |       |      |
|       | 39       |       |      |
|       | 40       |       |      |
|       | 41       |       |      |
|       | 42       |       |      |
|       | 43       |       |      |
|       | 44       |       |      |
|       | 45       |       |      |
|       | 46       |       |      |
|       | 47       |       |      |
|       | 48       |       |      |
|       | 49       |       |      |
|       | 50       |       |      |

| Claim | Date     |  |  |  |  |  |  |
|-------|----------|--|--|--|--|--|--|
| Final | Original |  |  |  |  |  |  |
| 51    |          |  |  |  |  |  |  |
| 52    |          |  |  |  |  |  |  |
| 53    |          |  |  |  |  |  |  |
| 54    |          |  |  |  |  |  |  |
| 55    |          |  |  |  |  |  |  |
| 56    |          |  |  |  |  |  |  |
| 57    |          |  |  |  |  |  |  |
| 58    |          |  |  |  |  |  |  |
| 59    |          |  |  |  |  |  |  |
| 60    |          |  |  |  |  |  |  |
| 61    |          |  |  |  |  |  |  |
| 62    |          |  |  |  |  |  |  |
| 63    |          |  |  |  |  |  |  |
| 64    |          |  |  |  |  |  |  |
| 65    |          |  |  |  |  |  |  |
| 66    |          |  |  |  |  |  |  |
| 67    |          |  |  |  |  |  |  |
| 68    |          |  |  |  |  |  |  |
| 69    |          |  |  |  |  |  |  |
| 70    |          |  |  |  |  |  |  |
| 71    |          |  |  |  |  |  |  |
| 72    |          |  |  |  |  |  |  |
| 73    |          |  |  |  |  |  |  |
| 74    |          |  |  |  |  |  |  |
| 75    |          |  |  |  |  |  |  |
| 76    |          |  |  |  |  |  |  |
| 77    |          |  |  |  |  |  |  |
| 78    |          |  |  |  |  |  |  |
| 79    |          |  |  |  |  |  |  |
| 80    |          |  |  |  |  |  |  |
| 81    |          |  |  |  |  |  |  |
| 82    |          |  |  |  |  |  |  |
| 83    |          |  |  |  |  |  |  |
| 84    |          |  |  |  |  |  |  |
| 85    |          |  |  |  |  |  |  |
| 86    |          |  |  |  |  |  |  |
| 87    |          |  |  |  |  |  |  |
| 88    |          |  |  |  |  |  |  |
| 89    |          |  |  |  |  |  |  |
| 90    |          |  |  |  |  |  |  |
| 91    |          |  |  |  |  |  |  |
| 92    |          |  |  |  |  |  |  |
| 93    |          |  |  |  |  |  |  |
| 94    |          |  |  |  |  |  |  |
| 95    |          |  |  |  |  |  |  |
| 96    |          |  |  |  |  |  |  |
| 97    |          |  |  |  |  |  |  |
| 98    |          |  |  |  |  |  |  |
| 99    |          |  |  |  |  |  |  |
| 100   |          |  |  |  |  |  |  |

| Final    | Claim |  | Date |  |  |  |
|----------|-------|--|------|--|--|--|
| Original |       |  |      |  |  |  |
|          | 101   |  |      |  |  |  |
|          | 102   |  |      |  |  |  |
|          | 103   |  |      |  |  |  |
|          | 104   |  |      |  |  |  |
|          | 105   |  |      |  |  |  |
|          | 106   |  |      |  |  |  |
|          | 107   |  |      |  |  |  |
|          | 108   |  |      |  |  |  |
|          | 109   |  |      |  |  |  |
|          | 110   |  |      |  |  |  |
|          | 111   |  |      |  |  |  |
|          | 112   |  |      |  |  |  |
|          | 113   |  |      |  |  |  |
|          | 114   |  |      |  |  |  |
|          | 115   |  |      |  |  |  |
|          | 116   |  |      |  |  |  |
|          | 117   |  |      |  |  |  |
|          | 118   |  |      |  |  |  |
|          | 119   |  |      |  |  |  |
|          | 120   |  |      |  |  |  |
|          | 121   |  |      |  |  |  |
|          | 122   |  |      |  |  |  |
|          | 123   |  |      |  |  |  |
|          | 124   |  |      |  |  |  |
|          | 125   |  |      |  |  |  |
|          | 126   |  |      |  |  |  |
|          | 127   |  |      |  |  |  |
|          | 128   |  |      |  |  |  |
|          | 129   |  |      |  |  |  |
|          | 130   |  |      |  |  |  |
|          | 131   |  |      |  |  |  |
|          | 132   |  |      |  |  |  |
|          | 133   |  |      |  |  |  |
|          | 134   |  |      |  |  |  |
|          | 135   |  |      |  |  |  |
|          | 136   |  |      |  |  |  |
|          | 137   |  |      |  |  |  |
|          | 138   |  |      |  |  |  |
|          | 139   |  |      |  |  |  |
|          | 140   |  |      |  |  |  |
|          | 141   |  |      |  |  |  |
|          | 142   |  |      |  |  |  |
|          | 143   |  |      |  |  |  |
|          | 144   |  |      |  |  |  |
|          | 145   |  |      |  |  |  |
|          | 146   |  |      |  |  |  |
|          | 147   |  |      |  |  |  |
|          | 148   |  |      |  |  |  |
|          | 149   |  |      |  |  |  |
|          | 150   |  |      |  |  |  |